UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

Form

abstract)

Drawings

by reference.

1.76

Submission

See 37 CFR 1.27.

Power of Attorney

Newly executed

Combined Declaration and

Copy from prior application

[Note Box 6 below]

2.

3.

4.

Attorney Docket No. 402864/SOGA Client Reference No. First Inventor Hidetaka MIYAKE **ELECTRIC DISCHARGE** Title MACHINING APPARATUS Express Mail Label No. Mail Stop Patent Application Commissioner for Patents ADDRESS TO: P.O. Box 1450 Alexandria, VA 22313-1450 **ACCOMPANYING APPLICATION PARTS** □ Utility Patent Application Transmittal Applicant requests early publication. 10. (include publication fee under 37 CFR Applicant claims small entity status. 1.18(d)) Specification (including claims and 11. Assignment Papers (cover sheet and document(s)) [Total Pages 21] 12. 🔲 37 CFR 3.73(b) Statement (when there is [Total Sheets 10] an Assignee) [Total Pages 4] 13. Power of Attorney 14. English Translation Document (if applicable) 15. 🛛 Information Disclosure Statement (IDS) Form PTO-1449 Deletion of Inventor(s) Signed statement attached deleting inventor(s) **Preliminary Amendment** 16. named in the prior application Return Receipt Postcard 17. 6. Incorporation by Reference: The entire (Should be specifically itemized) disclosure of the prior application, from 18. Claim of Priority & Certified Copy of Priority which an oath or declaration is supplied Document(s) 19. Request & Certification Under 35 USC under Box 5b is considered as part of the disclosure of the accompanying 122(b)(2)(B)(i) (Form PTO/SB/35 or its application and is hereby incorporated equivalent attached) 20. Other: 7. Application Data Sheet. See 37 CFR CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence a. Computer Readable Form (CRF) Specification Sequence Listing on: CD-ROM or CD-R (2 copies):

or ii. Paper Copy c. Statement verifying identity of above copies	
 If a CONTINUING APPLICATION, check a below: 	ppropriate box and supply the requisite information
☐ Continuation ☐ Divisional ☐ Continua	ation-in-part of prior application no.
Prior application information: Examiner	; Group Art Unit:

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APPLICATION FEES					
BASIC FEE				\$770.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total Claims	9 -20=		x \$18.00	\$	
Independent Claim	ns 3 - 3=		x \$86.00	\$	
☐ Multiple Dependent Claim if applicable +\$290.00			\$		
Total of above calculations =				\$770.00	
	\$()				
		+ \$40.00	\$40.00		
☐ Early publicatio	n fee if applicable		+ \$300.00	\$	
TOTAL =			\$810.00		
 Please charge my Deposit Account No. 12-1216 in the amount of \$810.00. A check in the amount of \$ is enclosed. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 12-1216: a.					
26. CORRESPONDENCE ADDRESS					
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Name	Jeffrey A. Wyand, Reg. No. 29,458				
Signature Affer Human					
Date Date 14203					

Utility Transmittal (Revised 10/1/03)